UNITED STATES -- PATENT DECLARATION FOR PATENT APPLICATION

Attorney's D cket No.: P-0324 OL

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below n xt to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a design patent is sought on the invention entitled SPRING CLAMP SYSTEM, which

(check one) X	is attached hereto.	
was filed onApplication Serial No.:		as
		,
and v	vas amended on	(if applicable)

I hereby state that I have reviewed and understand the contents of the aboveidentified specification, including the claims, as amended by any amendment r f rred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s):

Appln. No.	Country	Date Filed	Priority Claimed
			YES [] NO []
			YES [] NO []
·			YES [] NO []

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56(a) which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Appln. Serial No. Filing Date Status: Patented, Pending, Abandoned

| Patented | Pending | Abandoned |

POWER OF ATTORNEY

I hereby appoint the following attorn y(s) and/or agent(s) to prosecute the application entitled <u>SPRING CLAMP SYSTEM</u> and to transact all business in the Patent and Trademark Office connected therewith:

HOWARD N. ARONSON, Reg. #27,302; MYRON GREENSPAN, R g. #25,680; MARVIN FELDMAN, Reg. #25,797; HENRY A. MARZULLO, JR., Reg. #20,910; J. HAROLD NISSEN, R g. #17,283; THOMAS BLANKINSHIP, Reg. #39,909; and ANDREW F. YOUNG, Reg. No. 44,001.

Address all telephone calls to *Myron Greenspan*, at telephone number (914) 723-4300, or to the attorney executing the last document; address all correspondence to LACKENBACH SIEGEL at One Chase Road, Scarsdale, NY10583 U.S.A.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so mad are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the Unit d States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole Inventor Citizenship Michael PANOSIAN U.S.A. **RESIDENCE Address - Street POST OFFICE Address - Street** 300 North Cedar Street, #319 (same as residence) City (Zip) City (Zip) Glendale 91026 State or Country State or Country California, U.S.A. Date Signature **Full Name of Second Joint Inventor** Citizenship **RESIDENCE Address - Street -**POST OFFICE Address - Street City (Zip) City (Zip) --State or Country -State or Country Date Signature **Full Name of Third Joint Inventor** Citizenship **RESIDENCE Address - Street** POST OFFICE Address - Street City (Zip) City (Zip) **State or Country** State or Country Date Signature

Additional inventors ar being named on separately number d sh ts attached hereto.